

FEE TRANSMITTAL

PTO Form 101 (Rev. 10-2000)

Patent fees are subject to annual revision on

JUL 29 2001

TOTAL AMOUNT OF PAYMENT (\$): 1042

Complete if Known

Application Number 09/865,704
Filing Date May 29, 2001
First Named Inventor ITO et al.
Examiner Name MONDT, JOHANNES P
Group Art Unit 2826
Attorney Docket No 01-149

METHOD OF PAYMENT (check one)

1. ☐ The Commissioner's heretofore authorized, duly indicated fees and gratuity supplements.

2. ☒ Payment Enclosed.

☐ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description | Fee Paid |
|-----------------------|-----------------------|-----------------------|-----------------------|------------------------|----------|
| 101 | 141 | 201 | 71 | Utility filing fee | |
| 102 | 131 | 202 | 65 | Design filing fee | |
| 103 | 81 | 203 | 35 | Plant filing fee | |
| 104 | 74 | 204 | 33 | Reissue filing fee | |
| 105 | 161 | 205 | 81 | Provisional filing fee | |

SUBTOTAL (1) (\$): 0

2. EXTRA CLAIM FEES

| Total Claims | Extra Claims | Fee from Below | Fee Paid |
|--------------------|--------------|----------------|----------|
| 49 | 21 | 18 | 378 |
| Independent Claims | 5 | 1 | 84 |
| Multiple Dependent | | | |

*Number of claims in each category for Reissues: see below

| Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description |
|-----------------------|-----------------------|-----------------------|-----------------------|---|
| 106 | 171 | 206 | 81 | Claims in excess of 17 |
| 107 | 84 | 207 | 42 | Independent claims in excess of 5 |
| 108 | 171 | 208 | 81 | Multiple dependent claims in excess of 17 |
| 109 | 84 | 209 | 42 | Reissue independent claims in excess of 5 |
| 110 | 84 | 210 | 42 | Reissue multiple dependent claims in excess of 17 |

SUBTOTAL (2) (\$): 462

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description | Fee Paid |
|-----------------------|-----------------------|-----------------------|-----------------------|--|----------|
| 115 | 191 | 215 | 95 | Surcharge - late filing fee of utility | |
| 117 | 5 | 217 | 25 | Surcharge - late filing fee of small entity | |
| 118 | 131 | 218 | 65 | Non-English specification | |
| 147 | 151 | 247 | 75 | Extending a request for examination | |
| 112 | 921 | 212 | 460 | Requesting publication of SR prior to Examiner action | |
| 113 | 1441 | 213 | 720 | Requesting publication of SR after Examiner action | |
| 116 | 110 | 216 | 55 | Extension for reply within first month | |
| 119 | 41 | 219 | 20 | Extension for reply within second month | 400 |
| 117 | 921 | 217 | 460 | Extension for reply within third month | |
| 118 | 1441 | 218 | 720 | Extension for reply within fourth month | |
| 121 | 161 | 221 | 81 | Extension for reply within fifth month | |
| 119 | 31 | 219 | 15 | Notice of Appeal | |
| 120 | 31 | 220 | 15 | Filing a brief in support of an appeal | |
| 121 | 121 | 221 | 60 | Request for oral hearing | |
| 131 | 151 | 231 | 75 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unduly delayed | |
| 141 | 1281 | 241 | 640 | Petition to revive - unintentional | |
| 142 | 1091 | 242 | 545 | CRIS issue fee - in session | |
| 143 | 461 | 243 | 230 | Design issue fee | |
| 144 | 621 | 244 | 310 | Plant issue fee | |
| 122 | 131 | 222 | 65 | Petitions to the Commissioner | |
| 123 | 51 | 223 | 25 | Petitions related to provisional applications | |
| 126 | 181 | 226 | 90 | Submission of information Disclosure Sheet | 180 |
| 501 | 4 | 501 | 4 | Reopening each patent assessment per property - times number of properties | |
| 111 | 14 | 211 | 7 | Filing a submission after final rejection - 37 CFR § 1.121(a) | |
| 149 | 14 | 249 | 7 | For each additional invention in the same genus - 37 CFR § 1.121(a) | |

*Reissue Utility Basic Filing Fee Paid

SUBTOTAL (3) (\$): 580

SUBMITTED BY

Name and Title KERRY S. CULPEPPER

Amount Paid 45.672

TELEPHONE NUMBER

Number (202) 416-1638

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

TRANSMITTAL FORM

to be used for all correspondence after initial filing



| | |
|------------------------|-------------------|
| Application Number | 09 865 704 |
| Filing Date | May 29, 2001 |
| First Named Inventor | ITO et al. |
| Group Art Unit | 2826 |
| Examiner Name | MONDT, JOHANNES P |
| Attorney Docket Number | 01-149 |

ENCLOSURES (check all that apply)

| | | |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group <i>Appeal Notice, Brief, Reply, Brief</i> |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition Routing Slip (PTO SB 69) and Accompanying Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declarations(s) | <input type="checkbox"/> To Convert a Provisional Application | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | Marked Up Version of the Amendment |
| <input checked="" type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Small Entity Statement | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Request of Refund | |
| <input type="checkbox"/> Response to Missing Parts Incomplete Application | Remarks | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------------|------------------------------|
| Firm or Individual name | Law Offices of David G. Posz |
| Signature | |
| Date | July 29, 2002 |

OICE CERTIFICATE OF HAND DELIVERY

I hereby certify that this correspondence is being hand delivered to and deposited with the USPTO at the Customer Service Window, Office of Intellectual Property Examination, Crystal Plaza Building 2, Room 1B-13, 2011 South Park Plaza, Arlington, VA 22202, on the below indicated date. This is addressed to: Assistant Commissioner for Patents, Washington, DC 20514.

| | |
|----------------------|--------------------|
| Type or printed name | Kerry S. Culpepper |
| Signature | Date July 29, 2002 |